U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 7866	2. Fiscal Year Covered From:
	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Jerry R Westerholm	Name IBEW
	Labor Organization File Number 0000-116
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 900 7th ST. NW	Street 900 7th ST. NW
City Washington	City Washington
State District of Columbia ZIP Code + 4 20001	State District of Columbia ZIP Code + 4 20001
5. Position in labor organization. International Representative	
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization	derived income or other economic benefit of
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
6. Name and address of Employer (including trade name, if any). Name	
Name	7.a. Nature of Interest, Transaction, or Income.
Name Trade Name, if any:	
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	7.a. Nature of Interest, Transaction, or Income.
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	7.a. Nature of Interest, Transaction, or Income.
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount. Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the signatory and is, to the best of the
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Sign 15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany)	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount. Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the signatory and is, to the best of the

Date

Name of Person Filing Jerry Westerholm	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
Name and address of Business (including trade name, if any).	9. Business deals with:		
Name New York Life	generating		
Trade Name, if any:	a. Labor Organization		
P.O. Box, Bldg., Room No., if any	b. Trust		
Street 690 Canton Street	c. Employer		
City Westwood			
State Massachusetts ZIP Code + 4 02090			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name Name	No direct dealing; not aware of amounts with local IBEW/NECA trust funds.		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street	11.b. Approximate dollar value of such dealing.		
City	12.a. Nature of interest held or income received.		
State ZIP Code + 4	Dinner on 4/20/04 in Washington, DC		
	12.b. Amount. \$45		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4			
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.		

Name of Person Filing Jerry Westerholm	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Independent Fiduciary Services	a. Labor Organization		
Trade Name, if any:	housed		
P.O. Box, Bldg., Room No., if any Suite 1120	b. Trust		
Street 805 15th Street, NW	c. Employer		
City Washington			
State District of Columbia ZIP Code + 4 20005			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name	No direct dealing; not aware of amounts with local IBEW/NECA trust funds.		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.		
· ·	12.a. Nature of interest held or income received.		
	Dinner on 2/5/04 in Washington, DC		
	12.b. Amount. \$93		

Form LM-30 (2003)



INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS.

900 Seventh Street, NW Washington, DC 20001 202.833.7000 http://www.ibew.org

EDWIN D. HILL International President

JON F. WALTERS International Secretary-Treasurer August 12, 2005

U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

Re: Form LM-30

To Whom It May Concern:

The transactions, dealings and interests that are detailed in the attached Form LM-30 represent my good faith effort to reconstruct the reportable occurrence for the period of January 1, 2004, to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted.

Sincerely yours

Jerry R. Westerholm

JRW:bmp Attachment